# State of Louisiana

Department of Veterans Affairs

Louisiana War Veterans= Home

Jackson, LA

# STRATEGIC PLAN FY 2011-2012 THROUGH FY 2015-2016

## **Louisiana War Veterans= Home Strategic Plan**

VISION: To be the foremost State Veterans= Home and long term care facility in the United States, establishing a model for others to aspire to, focusing on quality and fostering wellness, harmony, and maximization of individual potential.

MISSION: To provide nursing care to eligible Louisiana veterans. Treatment will be provided for medical and psychiatric conditions on a continuous basis with the objective to return the resident to the highest possible level of physical and mental capacity.

PHILOSOPHY: To accomplish the mission of the Louisiana War Veterans= Home by hiring, training, and retaining those skilled and capable individuals, without bias, and based on merit, who are essential to providing cost effective, quality services to Louisiana=s veterans; to provide services to our residents in an efficient, courteous and compassionate manner; to insure that our employees work in an environment where they are encouraged to strive for excellence; and to insure that our residents are provided with the utmost standard of care in the best of environments.

#### GOAL:

Assure continued operational effectiveness of facility.

GOAL I Assure continued operational effectiveness of the facility

OBJECTIVE I.1 Maintain mandated nursing staffing ratio through June 30, 2016

STRATEGY I.1.1 Manage resident census in accordance with staffing levels.

STRATEGY I.1.2 Implement management initiatives to enhance nurse recruitment and

retention efforts

#### PERFORMANCE INDICATORS:

Input: Total number of nursing hours worked daily

Daily resident census

Output: Total days of care - nursing care

Outcome: Hours of nursing care provided per resident per day

OBJECTIVE I.2 Maintain an occupancy rate of 96% or above throughout one complete

year by 2016.

STRATEGY I.2.1 Solicit new residents through Social Services and social agencies in

Louisiana.

STRATEGY I.2.2 Utilize media to encourage walk-ins and community requests to Home.

STRATEGY I.2.3 Utilize ancillary committee, community and veterans organizations to

solicit new residents.

STRATEGY I.2.4 Enhance the referrel network with the U.S. Department of Veterans=

Affairs Medical Center in New Orleans and the VA Outpatient Clinic in

Baton Rouge.

#### PERFORMANCE INDICATORS:

Input: Total admissions - Nursing Care

Output: Total days of care - Nursing Care

Outcome: Average daily census - Nursing Care

Outcome: Percentage of occupancy - Nursing Care

Efficiency: Average cost per patient day - Nursing Care

OBJECTIVE I.3: Increasing federal share of facility funding to approach or arrive at

maximum 50% of cost per patient day as provided by federal regulations while holding state costs below 15% of cost per patient day by 2016.

STRATEGY I.3.1 Actively support efforts by National Association of State Veterans Homes

to increase federal per diem payments.

STRATEGY I.3.2 Constantly monitor federal per diem requests to insure maximum benefit

received.

STRATEGY I.3.3 Continue increasing efforts toward maintaining facility census at highest

level possible.

STRATEGY I.3.4 Maximize other revenue sources to balance federal payments and offset

state revenues received while insuring compliance with federal mandates.

#### PERFORMANCE INDICATORS:

Input: Average cost per patient day

Output: Average state cost per patient day

Outcome: Percent of cost per patient day

#### **APPENDIX**

#### 1. Principal Customers:

The principal customers served by the Louisiana War Veterans= Home are residents, residents= families and employees.

#### 2. Principal Beneficiary:

The principal beneficiary of services provided by the Louisiana War Veterans= Home is the individual veteran-resident. Quality nursing and domiciliary care is provided to residents of the Home.

#### 3. External Factors:

The achievement of stated goals and objectives is partially dependent upon the provision of adequate funding from the Home=s three principal revenue streams: State General Funds, VA reimbursement and Care and Maintenance fees.

#### 4. Statutory Authorization:

Act 152 of 1965 Legislature and Act 648 of 1968 Legislature Amended by: Act 294 of 1974 Legislature Act 687 of 1974 Legislature Act 300 of 1976 Legislature Act 507 of 1981 Legislature and Acts 285 of 1981 Legislature

and Section 641, Title 38, U.S. Code

#### 5. Development:

The Louisiana War Veterans= Home has utilized the Strategic Planning process to identify needs and health care trends and to establish organizational priorities and goals for the last three years. This process involved employees at various organizational levels, as well as the customers served.

#### **6.** Objective Beneficiaries:

Objective I.1: Louisiana veterans will primarily benefit from this objective.

Objective I.2: Residents and residents families, as well as the state of Louisiana will

primarily benefit from this objective.

#### INDICATOR DOCUMENTATION SHEET

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Total number of nursing hours worked daily
- 2. **Indicator type:** Input
- **Rationale:** Measures the number of nursing hours worked by nursing staff each day
- **4. Data collection procedure/source:** LWVH Records
- Frequency and timing of collection: Daily reporting: Daily
- **6. Calculation methodology:** Add the number of nursing hours worked by each nursing staff member each day
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Director of Nursing
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Daily resident census
- 2. **Indicator type:** Input
- **3. Rationale:** Measures the number of residents on the facility=s rolls each day
- **4. Data collection procedure/source:** LWVH Records
- 5. Frequency and timing of collection: Daily reporting: Daily
- **6. Calculation methodology:** Add the number of residents on each unit as of midnight each day
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Director of Nursing
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Total days of care nursing care
- 2. **Indicator type:** Output
- 3. Rationale: Measures cumulative number of veteran residents cared for each day
- **4. Data collection procedure/source:** Facility medical records
- Frequency and timing of collection: Daily reporting: Daily
- **6.** Calculation methodology: Continually add total resident census each day to previous days total
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Director of Nursing
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

**DATE:** JULY 1, 2010

- 1. Indicator name: Hours of nursing care provided per resident day
- **2. Indicator type:** Outcome
- **3. Rationale:** Measures nurse staffing ration
- **4. Data collection procedure/source:** LWVH Records
- 5. Frequency and timing of collection: Daily reporting: Daily
- **6.** Calculation methodology: Total number of nursing employees working each day times

8 hours divided by daily census

- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Director of Nursing
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. **Indicator name:** Total admissions - Nursing care
- 2. **Indicator type:** Input
- 3. Rationale: Measures the number of new residents admitted to Nursing Care Units
- 4. **Data collection procedure/source:** Facility medical records
- Frequency and timing of collection: Daily as needed 5.
  - reporting: Daily as needed
- **6. Calculation methodology:** Add number of new residents each day
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Director of Nursing
- **10.** Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Total days of care nursing care
- **2. Indicator type:** Output
- **3. Rationale:** Measures cumulative number of veteran residents cared for each day
- **4. Data collection procedure/source:** Facility medical records
- 5. Frequency and timing of collection: Daily reporting: Daily
- **6.** Calculation methodology: Continually add total resident census each day to previous days total
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Director of Nursing
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Average daily census nursing care
- **2. Indicator type:** Outcome
- **3. Rationale:** Establishes number of veteran residents cared for
- **4. Data collection procedure/source:** Facility medical records
- 5. Frequency and timing of collection: Daily reporting: Daily
- **6.** Calculation methodology: Add residents admitted to resident census minus residents discharged
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Director of Nursing
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Percent of occupancy Nursing care
- **2. Indicator type:** Outcome
- **Rationale:** Measures the utilization percentage of authorized facility beds
- **4. Data collection procedure/source:** Facility medical records
- 5. Frequency and timing of collection: Daily reporting: Daily
- **6.** Calculation methodology: Total census divided by total facility bed authorization
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Director of Nursing
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Average cost per patient day
- **2. Indicator type:** Efficiency
- **Rationale:** Measures amount of funding needed to care for each individual facility veteran resident each day
- **4. Data collection procedure/source:** Facility accounting department records
- **5. Frequency and timing of collection:** Monthly **reporting:** Monthly
- **6. Calculation methodology:** Total cost of operating facility divided by facility=s resident days of care
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Accountant
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Average cost per patient day
- 2. **Indicator type:** Input
- **Rationale:** Measures amount of funding needed to care for each individual facility veteran resident each day
- **4. Data collection procedure/source:** Facility accounting department records
- **5. Frequency and timing of collection:** Monthly **reporting:** Monthly
- **6. Calculation methodology:** Total cost of operating facility divided by facility=s resident days of care
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Accountant
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Average state cost per patient
- 2. **Indicator type:** Output
- **Rationale:** Measures the amount of funding required from state to provide nursing care for facility residents
- **4. Data collection procedure/source:** Facility accounting department records
- **5. Frequency and timing of collection:** Monthly **reporting:** Monthly
- **6.** Calculation methodology: Total cost per patient day multiplied by % state funding
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Accountant
- 10. Limitations of the indicator: none

**PROGRAM:** LOUISIANA WAR VETERANS= HOME

- 1. Indicator name: Percent of cost per patient day
- 2. **Indicator type:** Outcome
- **3. Rationale:** Measures the utilization percentage of authorized appropriated budge
- **4. Data collection procedure/source:** Facility accounting department records
- **5. Frequency and timing of collection:** Bi-Weekly **reporting:** Monthly
- **6.** Calculation methodology: Total daily expenditures divided by total daily census
- 7. **Definitions of any unclear terms:** not applicable
- 8. What aggregations of disaggregations of the indicator are needed? not applicable
- 9. Who is responsible for data collection and quality? Accountant
- 10. Limitations of the indicator: none

## PERFORMANCE INDICATOR MATRIX

Program: LOUISIANA WAR VETERANS= HOME 2010

GOAL: Assure continued operational effectiveness of facility

PERFORMANCE STANDARD	INPUTS	OUTPUTS	OUTCOMES	EFFICIENCY	QUALITY
Objective 1: Maintain mandated nursing staffing ratio through June 30, 2016	Total number of nursing hours worked daily. Daily resident census	Total days of care- nursing	Hours of nursing care provided per resident per day		
Objective 2: Maintain an occupancy of 96% or above throughout one complete year by 2016	Total admissions- nursing care	Total days of care- nursing care	Average daily census- nursing care Percent of occupancy- nursing care	Average cost per patient-nursing care	
Objective 3: Increase federal share of facility funding to approach or arrive at maximum 50% of cost per patient day as provided by federal regulations while holding state costs below 15% of cost per patient day by 2016	Average cost per patient day	Average state cost per patient day	Percent of cost per patent day		

STRATEGIC PLANNING

**SP 79** 

## STRATEGY ANALYSIS CHECKLIST

GOAL 1	Assure continued operational effectiveness of the facility		
ANALYSIS:			
	Cost/Benefit Analysis Conducted _X_ Other Analysis Used _X_ Impact on Other Strategies Considered		
<b>AUTHORIZ</b>	ATION:		
	Authorization Exists _X_ Authorization Needed		
ORGANIZATIONAL CAPACITY:			
	_x_ Needed Structural or Procedural Changes Identified _X_ Resource Needs Identification		
TIME FRAME:			
	_X_ Already Ongoing New, Startup Date Estimated _X_ Lifetime of Strategy Identified		
FISCAL IMPACT:			
	_X_ Impact on Operating Budget _X_ Impact on Capitol Outlay Budget _X_ Means of Finance Identified		